

## NEW MEMBERS

- 1) It is the practice of the Nebraska Public Employees' Retirement Systems to allow eligible new members to begin contributions on the first day of the month following completion of the eligibility requirements.
- 2) All new members must complete the Enrollment Form and Beneficiary Designation Form. They should be provided a plan booklet, Investment Booklet, Automated Pension Access Line (APAL) and Ameritas Pension Access On-Line information. The information on the forms must be either typed or printed in ink. The Enrollment Form must contain the following information:
  - (a) Employee's name
  - (b) Address
  - (c) Social Security Number
  - (d) Date of birth
  - (e) Sex
  - (f) Participation date
  - (g) State service (Show the month, day, and year member commenced employment with your agency/department. Employment with any other State agency/department should also be shown.) This should include only permanent state service. Indicate if the service is considered full or part-time. (part-time=9 hours or less, full-time=20 hours or more.)
  - (h) Agency number
  - (i) Investment allocations (in 5% increments)
  - (j) Four digit PIN number needed to access the APAL and Ameritas On-Line.
  - (k) Completed Beneficiary Designation Form - The employee should be advised of the importance of designating a beneficiary and updating the designation as circumstances require.
  - (l) Member's signature
- 3) Department Head or Authorized Representative must sign the form.
- 4) The original Enrollment Form must be submitted to the Retirement Office no later than the 15th day of the month in which the employee becomes eligible. **This process should not be delayed. The Member's account may be jeopardized if this is delayed.**

# SAMPLE FORM

## Enrollment Form

### Nebraska State Employees' Retirement System

#### Enrollment Form

Please type or print in ink

#### For Office Use Only

Initials \_\_\_\_\_  
Date \_\_\_\_\_  
Fhdr. \_\_\_\_\_

#### Member Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Initial \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Birth Date \_\_\_\_\_ Sex \_\_\_\_\_ Participation Date \_\_\_\_\_ Have you applied for Vesting Credit? Yes / No

NOTE: Temporary service does not apply towards eligibility or vesting.

Position Title \_\_\_\_\_ Status (Circle One) \_\_\_\_\_ Agency(ies):/GR # \_\_\_\_\_  
To \_\_\_\_\_ FT / PT / Temp. \_\_\_\_\_  
To \_\_\_\_\_ FT / PT / Temp. \_\_\_\_\_

#### Member Investment Election

**Please Note:** You must make your selections in 5% increments. The total must equal 100% of your member fund. If you fail to complete this portion of the Enrollment Form, your contributions will automatically be invested in the Stable Fund.

I elect to have my member contributions invested in the following manner. I understand these changes affect new member contributions only.

\_\_\_\_\_ % Stable Fund (10) \_\_\_\_\_ % Moderate Pre-mix Fund (23) \_\_\_\_\_ % Large Co. Value Stock Index (20)  
\_\_\_\_\_ % Money Market Fund (13) \_\_\_\_\_ % Aggressive Pre-mix Fund (22) \_\_\_\_\_ % Small Company Stock Fund (16)  
\_\_\_\_\_ % Bond Market Index (18) \_\_\_\_\_ % S&P 500 Stock Index (15) \_\_\_\_\_ % International Stock Fund (17)  
\_\_\_\_\_ % Conservative Pre-mix Fund (21) \_\_\_\_\_ % Large Co. Growth Stock Index (19)

The Funds listed above are not guaranteed either as to the rate of return or against loss of principal, by my employer. I agree to hold my employer harmless for any losses in these accounts.

#### Employer Investment Election

**Please Note:** You must make your selections in 5% increments. The total must equal 100% of your employer fund. If you fail to complete this portion of the Enrollment Form, your employer contributions will automatically be invested in the Employer Moderate Fund.

I elect to have my employer contributions invested in the following manner. I understand these changes affect new employer contributions only.

\_\_\_\_\_ % Employer Conservative Fund (07) \_\_\_\_\_ % Employer Moderate Fund (09) \_\_\_\_\_ % Employer Aggressive Fund (08)

The Funds listed above are not guaranteed either as to the rate of return or against loss of principal, by my employer. I agree to hold my employer harmless for any losses in these accounts.

Ameritas is hereby authorized to make allowable transfers of funds or changes in investment selection based upon instructions received from me by telephone or online. All telephone instructions will be recorded by Ameritas. Neither Ameritas nor any person acting on its behalf shall be subject to any claim, loss or liability if telephone or online instructions as hereby authorized are acted upon in good faith. This authorization shall continue in force until written revocation by me or discontinuance of this privilege by Ameritas.

Note: You must provide a Personal Identification Number (P.I.N.) to access your account by the Voice Response Unit (VRU) and online. This number may be changed at any time. (Specify four numbers only, not letters)

I understand that if I do not fill out a Beneficiary Designation Form, my account will be paid to my estate in the event of my death.

The above information is hereby certified to be true and accurate

Member Signature \_\_\_\_\_

State of Nebraska }

County of \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.

Notary Signature \_\_\_\_\_

My commission expires: \_\_\_\_\_

Mail to: Nebraska Retirement Systems, P.O. Box 94816, Lincoln, NE 68509  
<http://www.nol.org/home/pers>

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Distribution: White - Retirement Office, Canary - Ameritas, Pink - Member, Gold - Agency

## DETERMINING ELIGIBILITY

- 1) **Mandatory Membership** - All permanent full-time employees who have attained the age of 30, and have completed 24 months of continuous service, must enroll in the State Employees' Retirement System.

Full-time employee is defined as an employee who is employed to work one-half or more of the regularly scheduled hours during each pay period.

- 2) **Voluntary Membership** - An employee may elect voluntary membership after attaining age 20 and completing a total of 12 months of service as a permanent, full-time or part-time employee. (This service need not be continuous.) Service needs to be completed within a five year period.

Service as a TEMPORARY employee is not considered state service for purposes of retirement eligibility. Temporary employees are not eligible for membership in the plan.

Once membership is elected, members are subject to all provisions of the plan and cannot withdraw or cancel participation until ceasing employment.

- 3) **Exceptions** - The following state employees participate in separate retirement plans and ARE NOT eligible to join the State Employees' Retirement System:
  - (a) State judges
  - (b) State patrol officers
  - (c) Public school employees
  - (d) Employees of the University of Nebraska, state colleges and technical community colleges
  - (e) Employee of the Department of Labor (Division of Employment) hired prior to July 1, 1984.
  - (f) Employees of the State Board of Agriculture (Fair Board) employed after July 1, 1982.
  - (g) Army and Air National Guard technicians
- 4) Individuals appointed directly by the Governor are eligible for participation upon meeting the eligibility requirement. However, they may elect not to participate by filing a written election with the Retirement Office.

## ELIGIBILITY EXAMPLES FOR MANDATORY PARTICIPATION

The examples shown below are designed to aid you in determining the eligibility of new employees.

- 1) Employee is hired on 8/26/94. Date of birth is 10/12/64. Employee is a full-time employee working 40 hours per week. Mandatory participation effective 11/1/96.
- 2) Employee is hired on 7/2/94. Date of birth is 9/23/50. Employee is full-time working 25 hours per week. Mandatory participation effective 8/1/96.
- 3) Employees under the age of 55 who have been rehired (within 5 years) by a state agency covered by the State Employees' Retirement System must participate in the plan immediately.
  - a. If the employee was not previously vested and withdrew their funds, they may repay some or all of the contributions and receive credit for some or all of the time they participated in the plan previously. The employer account will be reinstated accordingly to the amount repaid by the employee. If they choose not to repay, the eligibility date will be the date of rehire and they will have to participate in the plan for 5 years to become vested.
  - b. If it has been more than 5 years, the employee will be treated as a new employee and will have to wait 12 months before entering the plan. (See page 17)
  - c. Please be advised: Any employee who ceases employment and returns to work within 120 days, will be required to repay any refund they may have taken.
- 4) Employees over the age of 55 and have been rehired by the State are considered new employees and must wait 12 months before participating in the plan.
- 5) Employee was hired 3/1/97, will be eligible for voluntary participation 3/1/98 or mandatory 3/1/99 if age 30. (Any day after the first of the month is effective the first of the next month.)

In the event an employee's eligibility date cannot be determined, please contact the Retirement Office for assistance.

## ELIGIBILITY EXAMPLES FOR VOLUNTARY PARTICIPATION

The examples shown below are designed to aid you in determining eligibility of employees for voluntary participation. ANY permanent employee who has attained the age of 20 and completed a total of 12 months service may elect voluntary participation. The service is cumulative rather than continuous.

- 1) It is the responsibility of the employing agency/department to advise their employees of eligibility for voluntary participation. We recommend employees be notified in writing of their option to join and that employees indicate their choice in writing. This will provide the employer with documented proof of compliance in the event of any future dispute.

An employee may decline voluntary participation when first offered, and then enroll at anytime thereafter. Permanent, full-time employees declining voluntary participation MUST be enrolled under the mandatory membership provisions when they meet the mandatory membership requirements.

- 2) In the event an employee's eligibility date cannot be determined, please contact the Retirement Office for assistance.

# STARTING CONTRIBUTIONS

It is your responsibility as the employing agency/department to ensure that contributions to the retirement plan commence within the first pay period following the effective date of enrollment. The effective date of enrollment is the first of the month following the employee's election to join the plan under voluntary membership, but must be no later than the first of the month following the date the employee satisfies the mandatory participation requirements.

We recommend that:

- 1) The employee's voluntary participation date is used on the Personal Information Form (PIF) at the time the employee is hired and placed on the payroll.
- 2) The Employee Deduction Authorization (EDA) is submitted to NEIS using the monthly or biweekly processing schedule for the month the employee is enrolled. (e.g. deductions he/she made in July if effective date is July 1st.)

You must be sure to update the information in the NEIS system anytime the employee's eligibility date is changed.

If you have any questions about the procedures for starting contributions, please refer to the NEIS manual.

NEIS manual, (pages 9-14) for information on paper EDAs.

NEIS manual, (pages 26-30) for information on terminal inputting.

## LATE ENROLLMENT

- 1) If an employee, qualifying for mandatory membership should have been enrolled earlier, that employee must make up the missed contributions. Contributions may be made in a lump sum payment by the employee or the employee may elect to make up the missed contributions over a period not to exceed four times the period which contributions were missed, up to a maximum of 60 months. In either case, the payments must be made through payroll deduction with additional contributions being remitted with regular contributions for the pay period.
- 2) The agency/department is required by law to appropriate state matching funds for the employee to make up contributions. The Retirement Office must approve the proposed repayment schedule in advance.
- 3) The agency/department must put in writing an explanation of how or why the contributions were missed, the number of contributions missed, the contribution amount, the salary for each time period, the state match on each missed contribution and over what time period the contributions will be repaid. The letter must be signed by both the agency/department head and the member.
- 4) An employee electing to join the plan under voluntary membership is not permitted to make-up contributions unless it can be proven the agency was in error by not starting the deductions at the proper time.

NOTE: Please refer to the "Remittance" chapter on how to report make up contributions to the Retirement Office.

# INVESTMENT OF CONTRIBUTIONS

The employee has the option and right to designate how his/her employee contributions are invested. They may be invested in the following:

Stable Fund (10)	Small Company Stock Fund (16)
Money Market Fund (13)	International Stock Fund (17)
S&P 500 Stock Index Fund (15)	Bond Market Index (18)
Large Co. Growth Index (19)	Conservative Pre-Mix Fund (21)
Moderate Pre-mix Fund (23)	Aggressive Pre-mix Fund (22)
Large Co. Value Index (20)	

The State's matching contributions may now be directed by the employee into one or all of the following:

Employer Conservative Fund (07)	Employer Moderate Fund (09)
Employer Aggressive Fund (08)	

Contributions may be invested in one or a combination of the funds, in increments of 5%, but must total 100%. If the investment election does not total 100%, any unallocated amounts of the employee's contributions will be defaulted to the Stable Fund.

As their employer, it is your responsibility to provide them with the Investment Book. These books are available through the Retirement Office. We suggest this book be provided at the same time the enrollment form is given to the employee. You will also need to provide them with the Automated Pension Access Line Brochure and the Ameritas On-line Brochure. It is the employee's responsibility to forward the completed Enrollment Form to you.

If the employee wishes to change the manner in which his/her contributions are being invested or transfer funds between the accounts, they may do so on the Automated Pension Access Line (APAL), by completing an Election/Transfer Form and mailing or faxing it to Ameritas Life Insurance Corp., or through a link found on the Nebraska Retirement web site at <http://www.nol.org/home/pers>.

All questions regarding Investment fund details, market analysis etc., should be directed to Sterling Financial Advisors at 1-877-970-9300 or in Omaha 970-9393.